

## BILLING PROCEDURE CODES

SERVICE	RSP	Habili- tation	HCBS Waivers						
			CMH	AIDS/HIV	Brain Injury	Elderly	Ill & Hand	MR	PD
Adult Day Care: Half Day				W1021	W1021	W1021	W1021	W1021	
Adult Day Care: Full Day				W1002	W1002	W1002	W1002	W1002	
Adult Day Care: Extended Day				W1203	W1203	W1203	W1203	W1203	
Adult Day Care: Hourly								W4021	
Assistive Devices						W1048			
Behavioral Programming					W1419				
Case Management		W1330			W1409				
CDAC (Agency- Hour)				W1265	W1265	W1265	W1265	W1265	W1265
CDAC (Agency- Day)				W1266	W1266	W1266	W1266	W1266	W1266
CDAC (Individual- Hour)				W1267	W1267	W1267	W1267	W1267	W1267
CDAC (Individual- Day)				W1268	W1268	W1268	W1268	W1268	W1268
CDAC (Assisted Living Provider)						W2517			
Chore						W1029			
<input checked="" type="checkbox"/> Comprehensive Community Support Services	H2014								
<input checked="" type="checkbox"/> Community Psychiatric Supportive Treatment Program / per diem	H0037								
Counseling- Individual				W1037			W1250		
Counseling- Group				W1038			W1251		
<input checked="" type="checkbox"/> Crisis Intervention	H2001								
<input checked="" type="checkbox"/> Day Hab-Daily		W1204						W1204	
<input checked="" type="checkbox"/> Day Hab-1/2 day		W1205						W1205	
<input checked="" type="checkbox"/> Day Hab-Hourly		W1206						W1206	
Environmental Modifications, Adaptive Devices, & Therapeutic Resources			W3245						
<input checked="" type="checkbox"/> Family & Community Support Services			W3246						
Family Counseling & Training					W1420				
<input checked="" type="checkbox"/> Health and Behavior Intervention – Individual	96152								
<input checked="" type="checkbox"/> Health and Behavior Intervention – Group	96153								
<input checked="" type="checkbox"/> Health and Behavior Intervention – Family	96154								
<input checked="" type="checkbox"/> Home-Based Habilitation (Hourly)		W1207							
<input checked="" type="checkbox"/> Home-Based Habilitation (Daily)		W1208							
Home Delivered Meals: Morning Meal				W1260		W1260	W1260		
Home Delivered Meals: Noon Meal				W1261		W1261	W1261		
Home Delivered Meals: Evening Meal				W1262		W1262	W1262		
Home Delivered Meals: Liquid Supplement				W1263		W1263	W1263		
Home Health Aide				T1021		T1021	T1021	S9122	
Homemaker				W1040		W1025	W1003		
Home & Vehicle Mod					W1417	W1031	W1417	W1302	W1417
IMMT- HHA (HHA care)					W2513		W2513	W2518	
IMMT- HHA (RN care)					W2514		W2514	W2519	
IMMT- (group child care/family child care home, lic child care center)					W2515		W2515	W2520	
<input checked="" type="checkbox"/> IMMT-SCL					W1518		W1518	W1518	
In-Home Family Therapy			W3247						
Mental Health Outreach						W1060			
Nursing-RN				T1030		T1030	T1030	S9123	
Nursing-LPN				T1031		T1031	T1031	S9124	
Nutritional Counseling						W1049	W1049		
Personal Emer. Response-Init Install					W1408	W1022	W1408	W1303	W1408
Personal Emer. Response- Monthly					W1407	W1023	W1407	W1304	W1407
<input checked="" type="checkbox"/> Pre-Vocational Services - Daily		W1425			W1425			W1425	
<input checked="" type="checkbox"/> Pre-Vocational Services - Hourly		W4425						W4425	
<input checked="" type="checkbox"/> Pre-Vocational Services – Half Day		W1426						W1426	
<input checked="" type="checkbox"/> Rehabilitation Program – Half Day (Adult)	H2001								
Respite-HHA Specialized			W2500	W2500	W2500	W2500	W2500	W2500	

☒ Financial and Statistical Report Due September 30<sup>th</sup> of each year.

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SERVICE	RSP	Habili- tation	HCBS Waivers						
			CMH	AIDS/HIV	Brain Injury	Elderly	Ill & Hand	MR	PD
Respite- HHA Basic Individual			<b>W2501</b>	W2501	W2501	W2501	W2501	W2501	
<input checked="" type="checkbox"/> Respite- HHA Group Respite			<b>W2502</b>	W2502	W2502	W2502	W2502	W2502	
<input checked="" type="checkbox"/> Respite- Home Care Agency & non-facility care, Specialized			<b>W2503</b>	W2503	W2503	W2503	W2503	W2503	
<input checked="" type="checkbox"/> Respite- Home Care Agency & non-facility care, Basic Individual			<b>W2504</b>	W2504	W2504	W2504	W2504	W2504	
<input checked="" type="checkbox"/> Respite- Home Care Agency & non-facility care, Group			<b>W2505</b>	W2505	W2505	W2505	W2505	W2505	
Respite- Facility Care (Hosp/NF providing Skilled Care)			<b>W2506</b>	W2506	W2506	W2506	W2506	W2506	
Respite-Facility Care (NF)			<b>W2507</b>	W2507	W2507	W2507	W2507	W2507	
Respite- Facility Care (ICF/MR)			<b>W2508</b>	W2508	W2508		W2508	W2508	
Respite- Facility Care (foster group care)			<b>W2509</b>	W2509	W2509		W2509	W2509	
Respite- Facility Care (adult day care)			<b>W2511</b>	W2511	W2511	W2511	W2511	W2511	
Respite- Facility Care (child care facility)			<b>W2512</b>	W2512	W2512	W2512	W2512	W2512	
Respite- Facility Care (RCF/MR)			<b>W2516</b>		W2516		W2516	W2516	
Respite- Resident Camp (week long, overnight, recreational)			<b>W2521</b>	W2521	W2521	W2521	W2521	W2521	
Respite- Group Summer Day Camp (group recreational)			<b>W2522</b>	W2522	W2522	W2522	W2522	W2522	
Respite- Group Specialized Summer Day Camp (group recreational)			<b>W2523</b>	W2523	W2523	W2523	W2523	W2523	
Respite- Teen Day Camp (recreational for ages 13-21)			<b>W2524</b>	W2524	W2524	W2524	W2524	W2524	
Respite- Weekend Onsite (recreational overnight)			<b>W2525</b>	W2525	W2525	W2525	W2525	W2525	
Senior Companion						W1047			
Specialized Medical Equipment					W1418				W1418
<input checked="" type="checkbox"/> Supported Comm Living- Daily					W1401			W1300	
<input checked="" type="checkbox"/> Supported Comm Living- Hourly					W1421			W1311	
<input checked="" type="checkbox"/> Supported Community Living-Residential-Based								W1320	
Supported Employment – Activities to Obtain a Job		<b>W1430</b>			W1430			W1430	
<input checked="" type="checkbox"/> Supported Employment- Job Coaching		<b>W1431</b>			W1431			W1431	
<input checked="" type="checkbox"/> Supported Emp- Personal Care		<b>W1432</b>			W1432			W1432	
<input checked="" type="checkbox"/> Supported Emp- Enclave		<b>W1433</b>			W1433			W1433	
Transportation- RTA						W1033			
Transportation- AAA						W1035			
Transportation- Mile					W1414			W1414	W1414
Transportation – Per Trip								W4414	

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